Effective on 12/08/2004, Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).					Complete if Known					
FEE TRANSMITTAL					Application Number 10/536,553					
					Filing Date 11/28/2003					
For FY 2009					Named Inventor	Wilhelmus Petrus Arnoldus Van Deijzen				
Applicant claims small entity status. See 37 CFR 1.27					iner Name	lili E. Anyikire				
					nit	2482				
TOTAL AMOUNT OF PAYMENT (\$) 130					Attorney Docket 3135 - 051655			- W - W - W - W - W - W - W - W - W - W		
METHOD OF PAYMENT (check all that apply)										
Check Credit Card Money Order None Other (please identify):										
Deposit Account Deposit Account Number: 23-0650 Deposit Account Name: The Webb Law Firm										
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)										
Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee										
Charge any additional fee(s) or underpayments of fee(s)										
under 37 CFR 1.16 and 1.17										
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.										
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)										
1. BASIC FILING, SEARCH, AND EXAMINATION FEES										
	FILING FEES SEARCH				EXAMINATION FEES					
Application Type	_	mall Entity Fee (\$)	<u>Si</u> <u>Fee (\$)</u>	mall Entity Fee (\$)	<u>S</u> <u>Fee (\$)</u>	mall Entity Fee (\$)		Foor P	aid (\$)	
Utility	330	82	540	270	220	110		<u>recor</u>	<u> </u>	
Design	220	110	100	50	140	70				
							-	-		
Plant	220	110	330	165	170	85				
Reissue	330	165	540	270	650	325			<del></del>	
Provisional	220	110	0	0	0	0				
2. EXCESS CLAIM FEES									Small Entity	
Fee Description Fee (\$) Each claim over 20 (including Reissues) 52									<u>Fee (\$)</u> 26	
Each independent claim over 3 (including Reissues)  220									110	
Multiple dependent claims								90	195	
_ · ·	20 or HP	Extra Cl	aims Fe	e (\$)	Fee Paid (\$)				ependent Claims	
-		=	x		2 42 2 447			e (\$)	Fee Paid (\$)	
HP = highest number of total claims paid for, if greater than 20.										
Indep. Claims -	3 or HP	Extra Cla		ee (\$)	Fee Paid (\$)					
HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof, See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)  -100 = /50 = (round up to a whole number) x =										
4. OTHER FEE(S)  Fees Paid (\$)										
Non-English Specification, \$130 fee (no small entity discount)										
Other (e.g., late filing surcharge): 1-month Extension of Time									130	
SUBMITTED BY										
Signature	161.	<u> </u>	Mill Street Control of the Street Control of		gistration No. ttorney/Agent)	34,219	Telephone	41	2-471-8815	
									19, 2011	
1.77							·	- /	•	